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## \*BIBDATASHEET\*

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Bib Data Sheet

<b>SERIAL NUMBER</b> 10/624,702	<b>FILING OR 371(c) DATE</b> 07/23/2003 <b>RULE</b>	<b>CLASS</b> 340	<b>GROUP ART UNIT</b> 2612	<b>ATTORNEY DOCKET NO.</b>
<b>APPLICANTS</b> Michelle A. Wagner, Toledo, OH;				
<b>** CONTINUING DATA *****</b> <i>U</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>R</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 03/19/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i> Verified and <i>My</i> Acknowledged <i>Examiner's Signature</i> <i>Initials</i>		<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 3
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b> George R. Royer Suite 416 316 N. Michigan Street Toledo, OH43624				
<b>TITLE</b> Portable surface member for conducting exercises of individuals				
<b>FILING FEE RECEIVED</b> 461	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	